

PTO/BB/62 (10-03)

Approved for use through 04/30/2007, OMS 0691-0038

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<b>REISSUE APPLICATION DECLARATION BY THE ASSIGNEE</b>		Docket Number (optional) <b>068795-0272202</b>
I hereby declare that:		
The residence, mailing address and citizenship of the inventors are stated below.		
I am authorized to act on behalf of the following assignee: <u>Khamis, Elias G.</u>		
and the title of my position with said assignee is: _____		
The entire title to the patent identified below is vested in said assignee.		
Inventor	<b>ELIAS G KHAMIS</b>	Citizenship <b>USA</b>
Residence/Mailing Address	Residence: Tustin, CA 92782 Mailing: 2170 Collier Court, Tustin, CA 92782	
Inventor	<b>MASSIMO MASSA</b>	Citizenship <b>Australia</b>
Residence/Mailing Address	Residence: Noble Park, Australia Mailing: P.O. Box 567, Noble Park 3174, Australia	
<input type="checkbox"/> Additional inventors are named on separately numbered sheets attached hereto.		
Patent Number	<b>5,930,729</b>	Date of Patent issued <b>July 27, 1999</b>
I believe said inventor(s) to be the original and first inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled:		
<b>RANGE EXTENSION ACCESSORY APPARATUS FOR CELLULAR MOBILE TELEPHONES</b>		
the specification of which		
<input type="checkbox"/> is attached hereto.		
<input checked="" type="checkbox"/> was filed on <u>June 20, 2001</u> as reissue application number <u>09 / 885,376</u>		
and was amended on _____ (if applicable)		
I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.		
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.		
<input type="checkbox"/> I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 305(b). Attached is form PTO/BB/02B (or equivalent) listing the foreign applications.		
I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)		
<input type="checkbox"/> by reason of a defective specification or drawing.		
<input type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.		
<input checked="" type="checkbox"/> by reason of other errors.		

(Page 1 of 2)

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.1 and 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on this amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/GB/52 (10-05)

Approved for use through 04/30/2007, OASIS 0861-0033

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<b>REISSUE APPLICATION DECLARATION BY THE ASSIGNEE</b>		<b>Docket Number (Optional)</b> 068795-0272802	
At least one error upon which reissue is based is described as follows: Claims in the patent were two narrow and not all subject matter was properly claimed; accordingly, new claims are required.			
[Attach additional sheets, if needed.]			
All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.			
I hereby appoint: <input checked="" type="checkbox"/> Practitioners associated with Customer Number: 27500 <input type="checkbox"/> OR <input type="checkbox"/> Practitioner(s) named below:			
Name		Registration Number	
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.			
Correspondence Address: Direct all communications about the application to:			
<input checked="" type="checkbox"/> The address associated with Customer Number: 27500			
OR			
<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Email		
<b>WARNING:</b>			
Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this application is directed.			
Signature			Date December 11, 2006
Full name of person signing (given name, family name) Khamis, Elias G.			
Address of Assignee 2170 Collier Court Tustin, CA 92782 US			

PTO/SB/51 (10-05)

Approved for use through 04/30/2007, OMB 0551-0033

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## REISSUE APPLICATION DECLARATION BY THE INVENTOR

Docket Number (Optional)

068795-0272202

I hereby declare that:

Each inventor's residence, mailing address and citizenship are stated below next to their name.

I believe the inventors named below to be the original and first inventor(s) of the subject matter which is described and claimed in patent number 5,230,729 granted July 27, 1999 and for which areissue patent is sought on the invention entitled RANGE EXTENSION ACCESSORY APPARATUS FOR  
CELLULAR MOBILE TELEPHONES

the specification of which

☐ is attached hereto.☒ was filed on June 20, 2001 as reissue application number 09/885,376and was amended on \_\_\_\_\_  
(If applicable)

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

☐ I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b). Attached is form PTO/SB/028 (or equivalent) listing the foreign applications.

I verify believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)

☐ by reason of a defective specification or drawing.☐ by reason of the patentee claiming more or less than he had the right to claim in the patent.☒ by reason of other errors.

At least one error upon which reissue is based is described below. If the reissue is a broadening reissue, such must be stated with an explanation as to the nature of the broadening:

Claims in the patent were too narrow and not all subject matter was properly claimed; accordingly, new claims are required.

[Page 1 of 2]

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PTO/SB/51 (10-05)

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**(REISSUE APPLICATION DECLARATION BY THE INVENTOR, page 2)**

Docket Number (Optional)

068795-0272202

All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.

Note: To appoint a power of attorney, use form PTO/SB/81.

Correspondence Address: Direct all communications about the application to:

☒ The address associated with Customer Number:

27500

OR

☐ Firm or  
Individual Name

Address

City

State

Zip

Country

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**WARNING:**

Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identify theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.

Full name of sole or first inventor (given name, family name)

ELIAS G KHAMIS

Inventor's signature

Date

December 11, 2006

Residence Tustin, CA

Citizenship

USA

Mailing Address

2170 Collier Court, Tustin, CA 92782

Full name of second joint inventor (given name, family name)

MASSIMO MASSA

Inventor's signature

Date

Residence Noble Park, Australia

Citizenship

Australia

Mailing Address

P.O. Box 367, Noble Park 3174 Australia

☒ Additional joint inventors or legal representative(s) are named on separately numbered sheets forms PTO/SB/02A or 02L-R attached hereto.

(Page 2 of 2)